

PART B - FEE(S) TRANSMITTAL

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83409 7590 12/31/2008
Oliver Intellectual Property LLC
P.O. Box 1670
Cotuit, MA 02635

02/18/2009 TL0022 00000009 10527471

01 FC:1501 1510.00 OP
02 FC:1504 300.00 OP
03 FC:8001 30.00 OP

MILTON OLIVER	(Depositor's name)
Milton Oliver	(Signature)
12 FEB 2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/527,471	03/11/2005	Walter Georg Angelis	870-003-187	3574

TITLE OF INVENTION: ARRANGEMENT AND METHOD FOR REMOVING HEAT FROM A COMPONENT WHICH IS TO BE COOLED

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	03/31/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
CIRIC, LJILJANA V	3744	165-247000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 MILTON OLIVER, ESQ.
2 OLIVER
3 INTELLECTUAL
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

EBM-PAPST ST. GEORGEN GmbH & Co. KG; ST. GEORGEN, GERMANY
D-78112

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 10

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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 504732 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Milton Oliver

Date

FEB 12, 2009

Typed or printed name

MILTON OLIVER

Registration No.

28,333

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